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	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Dockel Number Application or Dockel Number					
	APPLICATION AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY			OTHE SMALL	R THAN ENTITY				
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	EARCH FEE 7 CFR 1.16(k), (l), or (m))								•						
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	CFR 1.16(o), (p), or (q))						* .	4		ļ		<u> </u>			
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	EPENDENT GLAIMS CFR 1.16(h))			minus	3 =	•		7	X =			X =	· · · · · · · · · · · · · · · · · · ·		
If the specification and drawings exceed 100						٦,			1	<u> </u>	·				
APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each								,] .					
(37 CFR 1.16(s)) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 C					fraction th	nereof. See		,		ļ ·					
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(J)). /80 OR								OR	360						
TOTAL OR TOTAL ADD'L FEE															
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. 															

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35.U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer U.S. Palent and Trademark Officer U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

FORM PTO-1083

Attorney Docket No. 81790.0309 Customer No. 26021

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Art Unit:

Examiner:

2827

Nguyen, Viet Q.

In re application of: Noboru SHIBATA et al. Serial No. 10/764,828 Confirmation No. 7925 Filed: January 26, 2004

Semiconductor Memory Device

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith in the above-identified application are the following items:

Amendment and Response to Restriction Requirement.

Return Postcard.

No additional fee is required.

The fee has been calculated as shown below:

Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450, on September 7, 2005 **Date of Deposit** Juanita Soberanis Name Aliour 09/07/05 torop Signature Date

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMB PREVIOUSLY PAIL		(Cal. 3) PRESENT EXTRA*	LG/SI \$ ENTITY			DD'L E DUE
TOTAL CLAIMS FEE	24	$\left[\cdot \right]$	20	••	4	LG=\$50 SM=\$25	\$50	\$	200
INDEPENDENT CLAIMS FEE	· 8	$\llbracket \cdot vert$	8	***	0 .	LG=\$200 SM=\$100	\$200	\$	0
FIRST PRESENTATION	N OF MULTIPLE DEPENDENT	CLAIM	s			SE ENTITY FEE		\$	0
ADDITIONAL SIZE FEE	(IF ANY) (TOTAL PAGES OF	SPEC	AND DRAWINGS TOGE	THER)	\$250 FOR EACH A	ADDITIONAL 50)	\$	0
							TOTAL	s	200

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Peid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Peid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Peid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

	_ to cover the additional claims fee is	enclosed. A copy of this sheet is
enclosed.		
A check in the amount of \$	to cover the extension fee is enclosed.	A copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge \$200 to cover the additional claims fee to Deposit Account No. 50-1314. The Commissioner is authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

冈 Any patent application processing fees under 37 C.F.R. § 1.17

> Respectfully submitted, HOGAN & HARTSON L.L.P.

Date: September 7, 2005

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